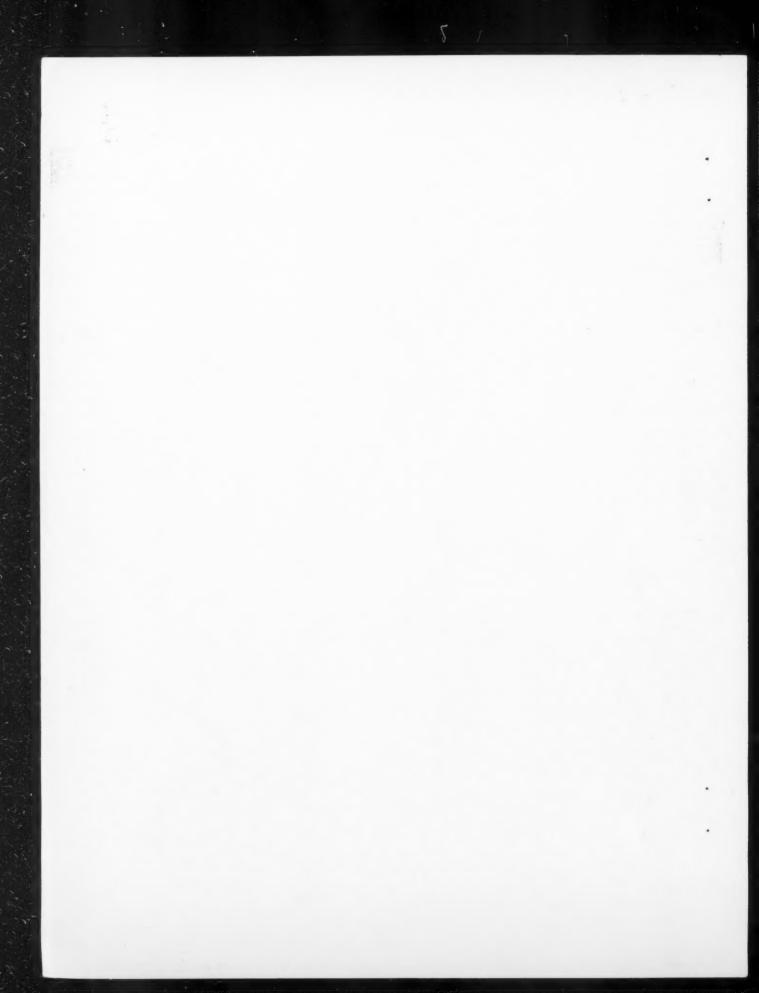
ANNUAL REPORT

1971



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#### PRESIDENT'S MESSAGE

Suicide Prevention and Crisis Service, Inc., has compiled a formidable record of cases handled and programs accomplished in this, its third full year of operation. More important than raw figures, however, are the areas in which this agency has fulfilled its unique role in the community and furthered its purposes as contemplated in its establishment.

As a member of the Study Committee of the former Community Welfare Council, now the Research and Planning Council, I participated in the planning of a suicide prevention service for the community. Our report, made some four years ago, envisioned a greater program of crisis intervention, with research, education and experimental programming as an integral part. Subsequently, as a member of the organizing Board, I shared in negotiating with the Department of Mental Health their most unusual contract, and have been aware of the affirmative interrelations between the agency and the Department. It has been my privilege to work with Dr. Gene Brockopp from that time three and a half years ago, when he was our single staff, to the present when he heads a total staff of some 30 persons, together with hundreds of enthusiastic volunteers.

My tenure as President this year has been challenging and fascinating. I have never heard staff say "\_\_\_\_\_but it's never been done that way before"; instead, the watchword is "Let's try it!"

The twenty-four hour, seven day telephone lines have continued as the service basic to all others, with the concommitant values of the extensive training undertaken by the volunteers before they begin to man the phones, and the cumulative experiences and results enabling research for treatment and prevention. A new program begun this year, designated Care-Ring, reverses the process, and the workers call on a regular basis those persons recommended by doctors, social workers, clergymen and other professionals.

The Night People Store Front reached persons not within the usual purview of community services. Regular assessment and evaluation indicated that the greatest number of contacts involved the area of alcohol. In consultation with the Department of Mental Health, the operation was phased out at the close of 1971 by the Board of Directors of Suicide Prevention and Crisis Service and was established by the Board of Directors of the Buffalo Area Council on Alcoholism,

as part of its own programming. This has been an unusual and innovative procedure in the creation of community services, and the cooperation of dedicated agencies for the most efficient use of community resources.

Consultation and education have always been an integral part of the fundamental purposes of Suicide Prevention and Crisis Service, and during this year, the agency has provided some many different programs involving hundreds of professional people in short and long term seminars and training sessions. In addition to training police officers, mental health professionals, nurses, social and probation workers, clergymen, hospital staff, programs have been developed for Housing and Urban Development, and Community Drug Services.

A large patient caseload is being seen for short term therapeutic personal and group counseling, and intake is immediate. The staff is diverse and devoted to providing better patient care and public service. We have received unusually complimentary congratulations from the State Department of Mental Hygiene and the County Department of Mental Health in our innovative programming and staffing, such as the creation of the position of attorney-clinician. Relations with other community agencies are excellent; our own referrals are accepted expeditiously and the understanding and cooperation of the so-called "doorkeeper" contacts such as police, hospitals, and clergymen is outstanding.

Suicide Prevention and Crisis Service has more than fulfilled the aspirations and proposals set forth in the study document four years ago. It has grown and developed to become an important part of the services of Erie County to its citizens, and has earned a reputation across the country as the service "where the action is". Staff has written for national and international publications, and is called upon to participate in professional meetings to present papers on the agency, its work and the developing knowledge and studies being done in suicide prevention and crisis intervention.

The following report contains minimal statistics and summaries on the work of the agency in 1971; If you are interested in more detailed information, please communicate with us. If you would like to share further in our total programs please join our volunteer program. We are instituting a new honor this evening, in acknowledging and recognizing the volunteers who have given 200, 500 and 1,000 and more hours of service to this community through Suicide Prevention and Crisis Service. We are grateful to all staff, volunteers and professionals, and to our excellent Board of Directors who share

not only the policy making decisions, but have their own personal horizons expanded by their contacts with this challenging and innovative agency.

Respectfully submitted,

Elloeen D. Oughterson President Suicide Prevention and Crisis Service

#### INTERDUCTION TO THE ANNUAL REPORT

Nineteen seventy one saw the fulfillment of the proposed plan for a Suicide Prevention and Crisis Service to Erie County. For the first time the center was fully staffed with individuals representing the mental health professions, with para-professionals and professional volunteers. The services of the center - clinical, research and education - moved into full, mature operation, providing Erie County - and the field of crisis intervention - with a model of service to the community worthy of emulation.

The Board of Directors, the Mental Health Department and the County of Erie have provided us with a support base which has made this achievement a reality. Urging us to try new ideas and models of service, they have allowed us to make mistakes, and we have profited from them. Recognizing that the center needs to change, they have accepted our proposals to turn over some of our functions to new or existing organizations in the community.

The reports that follow document our growth and our services. They also indicate the base on which we shall develop into an even more effective community agency in the future.

Gene W. Brockopp, Ph. D. Executive Director

#### BOARD OF DIRECTORS

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Children's Hospital
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at Buffalo
Senior, State University
of New York at Buffalo
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Criminal Justice Planning
Committee
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Clergyman WKBW-TV

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#### CONSULTANTS

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Philip Brogadir, Ph. D.
Albert S. Myers, Ph. D.

Executive Director Clinical Director Research Director Posearch Director Director Community Ed. & Consultin. Senior Therapist Senior Therapist Therapist Lawyer-Clinician Research Clinician Therapist Night People Supervisor Night People Administrative Assistant Night People Assistant Administrator Mental Health Counselor Mental Health Counselor Supervisor Volunteer Program Mental Health Counselor Out-Reach Case Aide Secretary Part-time Secretary Secretary Secretary Administrative Assistant Nightwatch Coordinator Secretary Research Assistant Receptionist Mental Health Technician Trainee Mental Health Technician Trainee Mental Health Technician Trainee Mental Health Technician Trainee

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Roderick Charles, M. D.
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Ron Maris, Ph. D.
Harold Mosak, Ph. D.
John Lick, Ph. D.
T. R. Verny, M. D.
Kurt Konietzko, Ph. D.

#### NIGHT PEOPLE STOREFRONT

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# **VOLUNTEERS**

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Sandra Arneson
Darrell Beam
Joan Beckley
Sue Berkowitz
Sharon Biegan
Katharine Boehm
Jane Bowen

Sarah Bronsky Pat Brown Gordon Brumagin Harry Brunner Judy Calabrese Michael Canazzi Vic Carlucci Joseph Cassata Adrienne Crandall Jim Crowe Linda Crowe Erv Cutler Nancy Davis Dennis M. Dennis Judy Dieterle Diane Douds Carol Dubnicki Diane Duffy Karen Ebersole Elizabeth Eckert David Elliott Bernie Engel Leslie Feinberg Barbara Feingold Aida Ford Jose Juentes Louis Gentile Jack Gold Pat Gold Debbie Goodman Mary Greenburg Glenice Guthrie Carol Hall Donald Hall Kent Hixon Tom Hosie Georgett Hurlburt Ellen Hyman Elizabeth Irving Carl Kaltwasser J. Katz Koren Keller Kathleen Kelly Connie Kerr Charlotte Killian Ron Koinger Barbara Koch

Roseanne Kollmar

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Harry Simon Michael Smukler Sam Soda Nancy Somit Tom Sonnenberg Larry Spivack Regis Stevenson Rita Stewart Ann Sullivan Richard Sullivan Robert Sullivan Liz Szymanski Karen Tanner Laurie Tobias Mary Urban Ellen Usdane George Vanghel Killian Vetter Sarah Wadsworth Betsy Walker Bruce Wansart Eleanor Weiss Doris Wells Al Wierling Charlotte Wilson Debbie Wojcik Marc Wunder Toni Wutz Esther Yasinow Ross Zimmerman

#### SUMMER INTERNS

Penny Rubin
Keith Bilger
Carol Aitchison
Robert A. Dame II
Deborah Lewis
Sheila Feingold
Warren Hayes
Lloyd Sokolow

#### TEEN LINE VOLUNTEERS

Charles Cohen
Andrew Fleishman
Joy Frank
Lyle Kantor
Alicia Karr
Edith Klumb
Anita Leddy
Margaret Musial
Karen Piretti
Marsha Polland
Elizabeth Rappaport
Vincent Richichi
Lauren Schneider
Susan Webb
Howard Weiss

# CARE-RING VOLUNTEERS

Sarah Bronsky
Pat Brown
Rosemarie Bruecki
Dorothy Cash
Mary Ann Creps
Doreen Damzalski
Patricia Jean Hens
Henry A. Houghtaling
Wilma LaFlam
Adele Meyer
Nan Myers
Helen Paull
Katherine Pitkin
Marianne Prange
Irene Wachowiak

#### PRESENT UNIVERSITY AFFILIATION OF STAFF MEMBERS

# GENE W. BROCKOPP, Ph.D.

Clinical Associate Professor of Psychiatry (Psychology), State University of New York at Buffalo, Faculty Member, Department of Social Psychiatry

Clinical Associate in Psychology, State University of New York at Buffalo

Faculty Member, Clinical Suicidology Fellowship, E.J. Meyer Memorial Hospital

#### LEE ANN HOFF, M.S.N.

Assistant Professor of Mental Health Psychiatric Nursing at the University of Buffalo

#### BUDGET

The 1971 budget again reflected the ever increasing concern and interest of the Erie County community into the area of crisis intervention and suicide prevention. The agency received a nominal amount of monies from fees and training conducted by S.P.C.S. staff. However, most of the operating funds of the center were obtained through the contract which the center has with the Erie County Mental Health Department. In the year 1971, \$298,818.00 were expended by the service. A breakdown of these expenditures appears in the table below.

#### Personal Services

Professional Nonprofessional	178,920.00
Equipment	1,583.00
Supplies and Materials	6,347.00
Other Expenses	
Telephone Professional books and	6,950.00
magazines	500.00
Nightwatch Program	7,850.00
Employee benefits	12,932.00
Rent	22,961.00
Other	11,919.00
Storefront	7,530.00
	298,818.00

# CLINICAL SERVICES OF THE S.P.C.S.

Lee Ann Hoff, M.S.N.

Clinical services of S.P.C.S.in 1971 have continued to revolve around its core component, the 24-hour telephone service. The most significant new development this past year is the improved coordination of all facets of the clinical service, that is, telephone counseling, walk-in clinic and community outreach. A closely related development is the increasing integration of clinical services with the other major functions of S.P.C.S., research, education and consultation. Details of these developments and a special statistical report of clinical activity follow.

#### TELEPHONE SERVICE

While the telephone service under administrative supervision of Silas Murray, continues to be staffed by volunteers - who began functioning on a complete non-pay basis in June, 1971 - this is presently done with much more active collaboration and supervision by clinical staff. For example, for several months staff members have worked one evening or night shift on the phones in an effort to gain a more direct appreciation of the problems faced by volunteers and to facilitate a sense of teamwork among volunteer and paid staff. While there are continuing problems in staffing some evening and night hours, the general quality of the telephone service has been upgraded. Several factors have contributed to this:

- More careful selection and training of volunteers, including an examination on knowledge, attitudes and skills upon completion of training.
- Increased responsibility on the part of staff for on-going supervision of volunteers.
- Increased involvement of volunteers and regular staff in monthly volunteer meetings.
- Volunteer participation in SPCS research and educational functions and other clinical programs, such as community outreach.
- 5. Participation of volunteers in process of selection, training and supervision of other volunteers.

#### WALK-IN CLINIC

Face-to-face counseling services have been extended on a daily basis--Monday through Friday--until 8 p.m. in an effort to accommodate the increasing number of clients needing services at these hours. The clinic is staffed from 5 to 8 p.m. by at least two, and sometimes three clinical staff and a receptionist. Individual, family and group methods of crisis counseling and therapy continue, with an increased use of family approaches in both office and home. The use of group counseling has been problematic with recent improvements in development and supervision of same. One of the groups-for adolescents-has been organized by Jack Tapp, Ph.D. research clinician, in a community based setting.

Clinical services have been expanded also by the availability of psychological testing done by the research director, David Speer, Ph.D. a clinical psychologist, regular consultation on various legal questions by Mr. Joe Bennett, a lawyer-clinician who joined the staff this year, and regular drug consultation and teaching by Larry Nemeth, M.D.

Systematic review of all treatment plans and termination summaries of cases has been upgraded during the past year. In addition to the supervisory aspect of this function, it has resulted in facilitating the process of coordinating S.P.C.S. services with other community agencies and developing follow-up and comprehensive treatment planning for clients such as repeat suicide attemptors and help-seekers who are simultaneously involved with several counseling agencies.

Relevant to this important clinical service is the increased collaboration by S.P.C.S. clinical and research staff with E.J. Meyer Memorial Hospital in the identification of suicide attemptors and comprehensive treatment planning for them. Marsha Linehan, Ph.D., research clinician, functions as regular liason person with Meyer Hospital in the development of this program which is anticipated to have interrelated research, clinical and training aspects. Work in this area is also in the process of development with other general hospitals in Buffalo and Erie County.

Relative to SPCS's basic service in the area of suicide prevention is its development of post-vention on behalf of survivors of suicides. This function has important diagnostic, clinical and research components. Currently clinical and research

staff are collaborating in the performance of several psychological autopsies which developed out of counseling services either requested by or offered to survivors of suicides. Lack of clinical and research staff time has prevented more extensive work in this area of suicide research and long-range prevention.

#### FOLLOW-UP

Closely related to the above developments is the initiation of follow-up services of which there are several components:

- Routine daily review of all telephone contact sheets by clinical staff (Tim Williams, M.S.W. and Dorean Kienke) who make indicated followup contacts with callers and/or volunteers.
- Telephone follow-up of clients scheduled for face-to-face counseling who fail to show.
- 3. Data gathering on no-show clients with a view to evaluation of this phenomenon of the clinical service in relation to such questions as inappropriate referrals by telephone counselors and the nature of the night-time vs. day-time crisis experience of callers.
- Beginning development of a system for identifying repeat callers and designating clinical staff members for planning and supervising telephone or alternate services for such callers.
- 5. Development of a system for follow-up of all suicidal clients of S.P.C.S. at one, three, six and 12-month intervals, with a view to offering continuing clinical services to this high risk group of clients and eventually evaluating the outcome of SPCS service to suicidal persons.

#### COMMUNITY OUT-REACH

The program of primary prevention begun in 1970 for persons in the high-risk category for suicide has continued and expanded this past year. Several volunteers are now assisting the mental health counselor, Fran Ciccia, in home visiting to the increasing number of elderly and shut-in persons referred to this program from a variety of sources including primarily the S.P.C.S. telephone service. This program is closely coordinated with the

primary suicide prevention service offered by Care-Ring. (See special report on Care-Ring). Consultation to public health nurses and other referred sources has also increased with the development of this home visiting service. Plans are under way to collaborate more actively with community health nurses in this work through a program of conferences on suicide and crisis intervention as well as regular consultation services to nurses working with this high-risk group.

Crisis home visiting to persons utilizing our telephone service has been expanded during the last few months. Each day and night there is a designated staff team of two on call for such visits. Staff participating in this service are also engaged in a group self training program which is used simultaneously for developing criteria to assess indications for crisis home visiting. As staff become more skilled in crisis intervention in home and community settings, volunteers will be recruited and trained to participate in the program. The success of this much needed emergency service in the community involves active collaboration with other agencies such as E.J. Meyer Memorial Hospital, police, and public health nurses which is in the process of development with Mary G. Pariser, M.S.W. acting as staff coordinator of the program.

Community outreach service has been initiated on behalf of another group of persons, namely, ex-offenders, who fail in the high-risk category of persons susceptible to experiencing crisis situations following release from prison. This program is presently in the demonstration project phase of development under the direction of David Speer, Ph.D. who is currently drafting a proposal to extend the service to larger numbers of ex-offenders. Aims of the program include primary prevention of personal crises for the high risk group, prevention of crises associated with crime, and hopefully, reduction of recidivism of offenders. Elsa Pacheco, mental health counselor, and several ex-offenders are participating in the various facets of this out-reach program.

#### RECORDS

S.P.C.S. Clinical and research staff have been in the process of evaluating and revising the record system during the past year with a view to more efficient and high quality service to clients as well as improved researchability and evaluation of our clinical functions. Telephone and face-to-face contact sheets have been revised, guidelines for recording case material have been developed and a method for identifying and following suicide attemptors and repeat callers has been initiated. Currently the entire SPCS record system is under study in the form of a supervised field project by students of the Professional Record Librarian program of Rosary Hill College.

# CLINICAL ACTIVITY OF THE SPCS (Statistical)

# Telephone Services during 1971

Total Number of Crisis Calls	Average per Month	Total New Callers
21,873	1,823	11,718

The distribution of these calls among the various telephone services, by month, is as follows:

	Suicide Prevention & Crisis Service	Problems of Living	Teen Problem Service	Drug Line
January	932	62	905	87
February	913	47	828	86
March	958	66	900	64
April	1,087	62	879	68
May	902	44	699	67
June	939	78	661	74
July	1.043	156	583	91
August	771	188	469	69
September	768	49	460	94
October	987	64	445	78
November	947	57	618	85
December	1,019	66	490	69
		_		_
Totals	11.266	939	7.937	932

# Crisis Clinic During 1971

Total Admissions	Total Termination	Total Visits
710	497	3636
42.6% of c	lients were seen	time
16.3% of c	lients were seen 2	times
13.5% of c	lients were seen 3	times
7.8% of c	lients were seen 4	times
19.8% of c	lients were seen 5	or more times

The distribution of admissions, terminations and visits by month are as follows:

	Admissions	Terminations	Visits
January	65	56	289
February	61	25	422
March	52	30	500
April	55	. 37	341
May	40	22	295
June	62	32	290
July	79	69	273
August	52	49	234
September	42	25	247
October	64	68	244
November	68	37	248
December	70	47	253

#### RESEARCH ACTIVITIES OF THE SPCS

David C. Speer, Ph.D.

During 1971, the Center experienced the loss of its Director of Research, Dr. David Lester to Stockton State College. Three new members were added to the staff in August and September, each with a 50% clinical and a 50% research assignment. The three new arrivals are Marsha M. Linehan, Ph.D. of Loyola University, David C. Speer, Ph.D of the Amherst H. Wilder Foundation, and Jack T. Tapp, Ph.D. of Vanderbilt University.

As during 1970, research activity has continued in:

- (1) Studying and revising the multiple record and data systems of the Center and the community as they relate to suicide and crisis.
- (2) Producing and editing the bulletin of SPCS: <u>Crisis Intervention</u>.
- (3) Investigating suicidal and crisis behavior in Buffalo and Erie County and the effectiveness of SPCS services.

In addition, certain new directions of research and program development activity were identified and embarked upon during 1971. Here the emphasis was on prevention, outreach and broader community mental health services. In an effort to responsibly develop and determine the effectiveness of these new services and programs, a number of proposals for supplementary federal funds are being prepared. These new areas of research and program development activity include:

- Prevention and crisis services for former prison inmates and others on the verge of committing illegal acts.
- (2) Crisis intervention training for offices at the County Jail.
- (3) Outreach and follow-up services to suicide attempters and couples with severe marital problems in collaboration with the Buffalo and suburban police departments and

the emergency room personnel of local hospitals.

(4) Study of the subsequent community and service careers of volunteer telephone counselors.

Proposals requesting federal research funds are also being prepared in order to study the sex role patterns of suicide attempters and completers, the effectiveness of crisis telephone services and the effectiveness of mandatory counseling among adolescent drug users.

# COMMUNITY EDUCATION AND CONSULTATION John Russell, M. Div., M.S.W.

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The work of S.P.C.S. in the area of Community Education and Consultation has been focused in several areas. First, we have been concerned with the training and development of our own staff, both volunteer and salaried, so that we may meet our service needs to the community. Following from this, one of our goals has been to make a steady input of people sensitized and trained in the area of crisis intervention and suicide prevention into the community. Third, we have been committed to the training of professional helping persons on an individual basis, whether they be persons who are currently in academic programs or persons now working with other helping agencies. Fourth, we have endeavored to offer our services in the area of training and consultation to agencies as a whole, to help them create an improved capacity for dealing with suicidal persons and persons in crisis. Finally, we have striven to develop, model, and move into the community new programs of service to persons in crisis where present programs are inadequate or non-existant. Progress in these areas during 1971 is outlined below.

# Volunteer Training

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With the movement of the S.P.C.S. volunteer staff to non-stipendiary status, a commitment was made during 1971 to on-going training of new volunteers, to enlarge the Volunteer telephone counselor group, and to provide an increasing number of persons in the community who have been trained as counselors in suicide and crisis intervention. There is now always a volunteer class in process at S.P.C.S., a change from doing training on an as-needed basis. A further change was in the development of training teams utilizing both staff and volunteers, with a different team of three volunteers and two or three staff handling each volunteer class from its selection until the class is firmly launched as telephone counselors. Volunteer training has been expanded and modified, with the continued experiential base being further developed by the addition of sensitivity and encounter techniques to already established didactic and role-playing methods.

A series of four special drug counseling sessions for staff and volunteers, was held at mid-year, as the Erie County Drug Hot Line began to receive more publicity through the Black Development Foundation and the Department of Mental Health. As needed, additional training programs for volunteers for Night People, the Teen Hot Line, Care-Ring, and the Jail Counseling Program were developed and operated by the staff of S.P.C.S.

#### Student Training Programs

During 1971, student training programs were run each semester, and through the Summer. An erlarged Summer internship program of ten weeks length, with nine interns, was completed, despite funding cuts. Interns were taken from graduate programs in psychology, law, divinity, rehabilitation counseling, social science, and social work. Interns worked in the clinic and doing telephone counseling, and participated in seminars and groups in the area of counseling, crisis intervention, and group process.

More than forty graduate and undergraduate students from the various schools of the State University of New York at Buffalo, including graduate nursing, medicine, social work, counselor education, psychology, and rehabilitation counseling, completed internships and field placements at S.P.C.S. during 1971. A special area of student work was with undergraduates from the departments of psychology and social work who focused their energies on the Teen Hot Line, with the cooperation of graduate students from the Department of Psychology, receiving and giving training, working in further development of the service, and planning a more appropriate location for the service.

A weekly seminar on topics of crisis intervention and suicide prevention was inaugurated for students, volunteers and personnel of other agencies, run by S.P.C.S. staff and will run through the Spring semester of 1972.

Four mental health technician trainees are currently serving twoyear internships with S.P.C.S., as a part of their work with the Erie County Mental Health Manpower Training Project, and have received special training and on-going seminars from the S.P.C.S. staff.

# Regional Training Programs

During 1971, S.P.C.S. designed and inaugurated regional training programs for professional staff of other agencies who were interested in learning to train and develop staff in their own agencies using the S.P.C.S. model. Dubbed "Trainer Training" for short, the program runs for an intensive period of four days, and explains, models, and gives experience in S.P.C.S. methods of service delivery and training. The programs were run quarterly through 1971 and trained more than forty staff members from agencies in Niagara Falls, N. Y., Genesee County, N. Y., Fredonia State College, Fredonia, N. Y., Bangor, Maine, Jamestown, N. Y., Warren, Pa., Bradford, Pa., Lewiston, Maine, Louisville, Ky., Ann Arbor, Mich., Champaigne, III., Toledo, Ohio, and Harrisburg, Pa.

#### Consultation and Training for Other Agencies

S.P.C.S. staff have carried on an extensive series of consultations with care-giving agencies in Western New York during 1971. Consultation and training for these agencies and groups fall into several areas.

One important area has been service to the hospitals, especially Meyer Hospital, where consultation about suicidal patients has been continuous with the Emergency Room staff and the staff of the Intensive Care Unit, as well as the Psychiatric units. Gowanda State Hospital was serviced with an all-staff training program in crisis intervention and treatment of the suicidal individual, over five sessions of four hours each through the month of November, 1971. Buffalo State Hospital has received training in suicidal precautions and treatment for three of its catchment area units.

During 1971, S.P.C.S. found a new area of focus for training and development with the developing drug programs of the New York State NACC Narcotics Guidance Councils and the new drug counseling centers of the Erie County Department of Mental Health. The Buffalo Narcotics Guidance Council had its volunteer staff trained by S.P.C.S. staff and volunteers. The West Side Drug Counseling Center also underwent a staff training program with S.P.C.S. Special consultation was developed with the Western New York Office of the Narcotics Addiction Control Commission (NACC), and in cooperation with NACC and the Junior League of Buffalo, a workshop was held for the members of boards of directors of the Narcotics Guidance Councils in the Western New York area in June, 1971.

Other areas of consultation and training have included a two-day seminar for clergy in crisis and suicide prevention, attended by 35 area clergymen; training for New York State parole officers in the area of counseling clients with drug problems, and a long list of talks and seminars given for classes in several colleges, many high schools, and for many community groups. Staff also addressed the community through several television presentations throughout the year.

The play, "Quiet Cries", presented to the S.P.C.S.' annual meeting last year was presented to a group at Meyer Hospital, and to the Clergy seminar. A new play, entitled "Suicide in the Hospital" was developed and presented by staff and volunteers in Gowanda State Hospital and at Buffalo State Hospital, as part of training programs conducted by S.P.C.S.

#### Community Program Development

Night People, the counseling outreach program in the "tenderloin area" of Buffalo's Chippewa Street, was continued for a second year, firmly established with a paid director and paid staff, as well as volunteers, and continued to have between 800 and 1,000 client visits per month. At the end of 1971, this program, with newly remodeled facilities, new staff, a proven method of operation, and funding for 1972, was handed over to the Buffalo Area Council on Alcoholism intact for operation under the general direction of the Erie County Department of Mental Health, climaxing more than two years of effort to plan, develop, model and establish a community counseling program in the Chippewa Street area.

S.P.C.S. continued its consultation with and support of the Manpower Development Project it had started two years prior, and is currently providing field experience for mental health technician trainees.

The Teen Hot Line is being readied for movement into a more appropriate place in the Buffalo Community through careful consultation and involvement of University and Church Groups, especially the Psychological Clinic of the State University of New York at Buffalo. While a commitment to move the service out has not been finalized, we feel certain that 1972 will either see such a move, or see the program considerably expanded and taking different directions within S.P.C.S. through the involvement of community groups, peer counselors and more thorough preparation for Teen Line Counseling. Arrangements are being pursued which will lead to telephone counseling training being given to high school juniors and seniors as a part of their high school class work.

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During 1971, plans were laid with the U. S. Department of Housing and Urban Development's Buffalo area office which will lead to a series of training programs in counseling and crisis intervention with HUD personnel in Western New York who serve as mortgage counselors, urban renewal relocation counselors, and code enforcement counselors. This is part of the SPCS mission to expand the capacity to deal with crisis of agencies who meet large numbers of the public in potential crisis situations daily.

#### CARE-RING

John Douds, Senior Therapist

Care-Ring is a telephone reach out program designed to respond to people who need regular positive attention due to isolation from the social mainstream. These people include the elderly, handicapped, alone, and shut-in. Members of this service receive a regular five minute call from a Care-Ring volunteer who is trained to listen with positive regard, avoiding problem solving or advice giving. Goals of the program are:

- C onsistency of positive attention, by setting a positive tone for the person's day.
- A ssurance that the Care-Ring service will be watchful, in the event something should happen.
- R eaching out, which lifts the member from the "begging" position and preserves personal dignity.
- E ncouragement that someone cares, rain or shine.

For certain members with physical disabilities, there is an emergency life line service designed to contact a close relative in the event the member does not answer his phone at a specified time. This offers assurance that if something dangerous should happen the Care-Ring service will respond.

With the help of personal donations Care-Ring opened its operation in October, 1971. To date the service has attracted fifty members ranging from 30 to 88 years of age. Response from the members indicates that they view the service as a positive source of communication in their daily lives. At present, hours of operation are between 10 A.M. and 2 P.M. Monday through Friday. Shortly, the service will expand into weekends and gradually develop a home visiting program.

The following statistics represent an overview of the current Care-Ring membership:

ACTIVE MEMBERS

TOTAL CALLS PER WEEK

38

120

# AGE AND SEX CHARACTERISTICS INCLUDE

55% are over 60 years of age

35% are between 50-60 years of age

10% are under 50 years of age

82% are female

18% are male

# PRIMARY REASONS FOR SERVICE INCLUDE:

39% Physical handicap

34% Social isolation

27% Mental disability

Currently we are continuing to build our volunteer training with four sessions of required training in (1) Listening (2) Talking (3) Responding to specific communication problems and (4) Use of community resources.

#### SPEECHES AND PUBLIC RELATIONS

The staff of the agency, the Board of Directors, and our telephone volunteers took a very active part in alerting the community to our services by speaking before numerous professional and civic groups, clubs and schools, etc., interested in the Suicide Prevention and Crisis Service, Inc., its work, facilities and goals.

We have been very fortunate in receiving cooperation from the local newspapers, not only the Buffalo Evening News and the Courier Express, but also the Pennysavers and other suburban papers. T.V. and Radio Stations have presented public announcements on our behalf, using slides and spot announcements which we supplied to them.

Throughout the month of April, our PROBLEMS CAN HURT posters were displayed by the Metro Transit System. The majority of high schools and colleges are utilizing our poster, and a number of police precincts have given our calling cards to the public with whom they have come into contact.

Radio and television programs were presented in the Western New York area including DIALING FOR DOLLARS, CONTACT, etc., and Panel Discussions with considerable staff participation. N.B.C. of New York City invited Dr. Brockopp for the taping of a Nationwide television program "For Women Only", and extensive programs were conducted at Health Centers, Telephone Emergency Centers, Agencies, etc., in various parts of the Eastern United States.

In summary, we have increased our efforts in publicizing our services to the residents of Erie County, and to promote mental health in our community.

# CRISIS INTERVENTION The Bulletin of the Suicide Prevention and Crisis Service Erie County, New York

In 1971 the Agency continued its publication of the CRISIS INTERVENTION bulletin.

Four regular issues were prepared during the year and sent to suicide prevention centers throughout the United States, the members of the American Association of Suicidology, and other interested professional and non-professional individuals, both here and abroad. Many State, University and private libraries have also requested to be placed on our mailing list.

During the early part of 1971 we were notified that  $\frac{\text{CRISIS}}{\text{Psychological Abstracts}}$ .

Presently, plans are being made to offer Crisis Intervention on a subscription basis to interested individuals. If you are interested in obtaining copies of the bulletin, please advise us.

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